

12 JAN 31 PM 5:46

Office Use Only

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
 For An Authorized Committee

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Gillibrand for Senate

ADDRESS (number and street)

236 Massachusetts Ave NE

Suite 110



Check if different than previously reported. (ACC)

Washington

DC

20002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00413914

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

NY

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

09

14

2010

in the State of

NY

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

09

14

2010

in the State of

NY

5. Covering Period

07

01

2010

through

08

25

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Karen Feldman

Signature of Treasurer Karen Feldman

Date

01

31

2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
 (Revised 02/2003)